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CONFIRMATION NO. 1387

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|---|---|-------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/707,388  | <b>FILING OR 371(c) DATE</b><br>12/10/2003<br><b>RULE</b>   | <b>CLASS</b><br>438           | <b>GROUP ART UNIT</b><br>2891   | <b>ATTORNEY DOCKET NO.</b><br>FIS920030274 |                                |
| <b>APPLICANTS</b><br>Ramachandra Divakaruni, Ossining, NY;<br>Jay W. Strane, Chester, NY;   |   |                               |   |  |                                |
| <b>** CONTINUING DATA *****</b><br><i>None. sst</i>   |   |                               |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b><br><i>None sst</i>   |   |                               |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE</b><br><b>GRANTED ** 06/04/2004</b>  |   |                               |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i> |   | <b>STATE OR COUNTRY</b><br>NY | <b>SHEETS DRAWING</b><br>3  | <b>TOTAL CLAIMS</b><br>20                  | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>23550   |   |                               |   |  |                                |
| <b>TITLE</b><br>SILICIDE RESISTOR IN BEOL LAYER OF SEMICONDUCTOR DEVICE AND METHOD  |   |                               |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>770   | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |